

RFQ NOTIFICATION SHEET
Office of Contracts and Rate Setting

State of Michigan
Department of Human Services

Notice of a request for quotations or a request for proposals is hereby given Pursuant to Act No. 124 of the Public Acts of 1999.

Amount:	ITB Number
\$566,667 over two years, 10 months	DHS SFSC_07-82001

Bid Description:

Wayne County DHS, Strong Families/Safe Children - Kinship Support Services:

This RFQ seeks to enhance the efforts of willing grandparent/kinship families faced with the responsibility of caring for their grandchildren or minor relative(s). The selected contractor will be expected to deliver services under the following four service categories:

- 1) Kinship Care Assessment/Service Plan**
- 2) Workshop - Development and Facilitation**
- 3) Kinship/Grandparent Support Groups**
- 4) Respite Care opportunities and coordination**

A contract for the period 12/1/06 through 9/30/09 may be awarded. The annual maximum bid may not exceed \$200,000. The pro-rated amount for the period 12/1/06 through 9/30/07 shall be: \$166,667. The contract amount for subsequent years will be dependent on DHS availability of funds and service needs.

Due Date For Response:

Thursday, September 14, 2006; 1:00 PM

Contact Person Name:

Duma Jensen, Contract Administrator

Phone #:

(313) 456-1271

E-Mail Address:

JensenD@michigan.gov

REQUEST FOR QUOTE
Michigan Department of Human Services

Contract/RFQ Number: **SFSC-07-82001**

Bid Submission Due Date & Time: **Thursday, September 14, 2006; 1:00 PM**

Geographic Area to be Served: **Wayne County**

Service Titles: **KINSHIP SUPPORT SERVICES (COMPONENTS)**

- 1) Kinship Care Assessment/Service Plan**
- 2) Workshop - Development and Facilitation**
- 3) Kinship/Grandparent Support Groups**
- 4) Respite Care opportunities and coordination**

Anticipated Contract Begin and End Dates: **December 1, 2006 – September 30, 2009**

Method of Reimbursement: **X** Actual Cost Unit Rate

Maximum Annual Contact Amount: \$ **200,000** per year

Issuing Office: Department of Human Services **Wayne County**

Contact Person: **Duma Jensen**

Telephone #: **313-456-1271** Fax #: **313-456-1269**

Email Address: **JensenD@michigan.gov**

Thursday, August 31, 2006; 10:00 AM
North Central District, Conference Rms C & D

Pre-proposal Conference: (Date, time, location) **13233 Hamilton Avenue, Detroit, MI 48203**
(Please notify the contact person above if you plan on attending)

Bidder Questions Due Date & Time: **Friday, September 1, 2006; 1:00 PM**

Submit six (6) copies of the bid response and two (2) copies of the budget document, in a separate sealed envelope, to this address:

Wayne County DHS – Cadillac Place

DHS Office

3040 West Grand Blvd., DHS Reception – Suite 4-100

Street Address

Detroit

MI

48202

City

State

Zip

The bidder must submit all inquires regarding content via e-mail or surface mail. Bid responses must be submitted in person or via surface mail. Neither fax nor e-mail transmission of bid responses will be considered for award. If DHS believes that clarification of its initial material is necessary, information will be posted to the DHS RFQ web site. Likewise, if DHS determines it is necessary to revise any part of this RFQ, addenda informing will be posted to the DHS RFQ web site.

Bid responses that exceed the maximum annual dollar amount indicated for the RFQ will not be considered for award. The contract amount for subsequent years will be dependent on DHS’ availability of funds and service needs. The established price per unit of service will be in effect for the entire period of the contract.

For the first contract period, the annual dollar amount will be prorated for the remainder of the year.

To be considered, bid responses must arrive at the Issuing Office on or before the date specified above. Bidders mailing bid responses should allow normal delivery time to ensure timely receipt of their bid responses.

Awards made as a result of this RFQ will require execution of a contract with DHS. The contract will contain standard non-negotiable General Provisions. A copy of the General Provisions is available upon request.

Rating

All bid responses will be evaluated on the basis of rating criteria identified in the RFQ. Contracts will be awarded using a two-step process linking price and quality. The most recent audit of each bidder may be reviewed by DHS, at its discretion, to determine the bidder’s fiscal viability. DHS may eliminate from the rating process any bidders that fail to pass this review. If the bidder has provided contractual services to DHS previously, DHS may consider reviewing monitoring and/or outcome information related to prior contracts.

Authority: P.A. 2080 of 1939. Completion: Mandatory. Penalty: Contract Invalid	Department of Human Services (DHS) will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, height, weight, marital status, political beliefs or disability. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you are invited to make your needs known to a DHS office in your area.
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BIDDER OVERVIEW
KINSHIP SUPPORT SERVICES

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INFORMATION PROVIDED BY DHS SPECIFIC TO THIS RFQ

PURPOSE

This Request for Quotation (RFQ) is to provide interested contractors with sufficient information to enable them to prepare and submit proposals for consideration by the Department of Human Services to satisfy its need for **KINSHIP SUPPORT SERVICES**. KINSHIP SUPPORT SERVICES are all of the necessary resources (workshops, hands-on-training, transportation, legal assistance, vacation, etc.) that are needed for a suitable relative placement designed to help families develop a plan to ensure children are cared for and protected within their extended birth families and maintained in their communities.

This RFQ seeks to identify an agency or organization that will work with Grandparents/kinship families to establish, maintain, and make family preservation successful.

STATEMENT OF PROBLEM

Many Wayne County Grandparents/kinship families are faced with the responsibility of raising children. These families step up to assume this role because the parents of the child(ren) may be deceased, unable, or unwilling to care for the child(ren). Wayne County DHS has a mission to promote and maintain a family unit or stability whenever possible. The objective of this RFQ is to find a contractor who will provide Kinship Support Services to help make family preservation a reality.

1. Client characteristics and eligibility criteria.
Kinship families with DHS involvement or community and self-referrals.
2. Expected Outcomes .
 - a. **Maintain child(ren) with relatives in the community.**
 - b. **Promote Kinship placement for youth**
 - c. **Identify services designed to keep kinship placements intact.**
3. Extent of problem - volume.
A large number of grandparents benefited from this service when it was previously offered. At the present time, there are close to 50 applicants on the waiting list. It is believed that there may be many more applicants when the program is publicized as being open.

When one-time or other short-term workshop opportunities are considered, it is expected that the contractor will serve a projected annual total of 500 to 1,000 participants.

Respite care is among the biggest need for the Grandparents/kinship families. The contract will be expected to address four service need areas providing short-term activities (workshops/respice care) and skills/knowledge to the families for accessing long-term resources. The contractor will typically schedule such respite over a weekend, seasonally or as can be arranged. It is expected that between 75 to 264 families will participate in these one-time respite care programs as they are offered by the contractor.

PRIOR EXPERIENCE DISCLOSURE

Prior experience in the field of **addressing Kinship Support Service issues** is important in the selection of a contractor. Proposals submitted should include:

- **An operational summary of any current or recent Kinship Support Service programs.**
- **Please include the number of families served (total kinship families, total number of child(ren)), the duration of period you provided the service and the final outcome or status of those families who were in the program that you managed.**

PERSONNEL

The Desirable staff qualification characteristics:

An appropriate professional staff whose background and training consist of conducting assessments, accessing free community resources, teaching or conducting training/workshops. Staff should have skills necessary to conduct Customer Satisfaction feedback.

The contractor must supply staff that clearly possesses talent and experience:

- **Supervisor/Team Leader**
Appropriate bachelor's or master's degree holder, especially in social work or other professional human service field with experience in conducting assessment and coordinating many different community resources.
- **Coordinator(s)**
A professional with a minimum of a bachelor's degree in social work, counseling or related discipline and/or with equivalent work experience.

Coordinator(s) must demonstrate the ability or the know-how of accessing resources to implement the service plan or programs as identified by the Supervisor/Team Leader.

LOCATION

The location for this service will be Wayne County. This service was previously piloted and carried out at two sites (East-Side and West-Side of Detroit). Proposals that address all locations within Wayne County in a cost effective and efficient manner will weigh significantly in rating the proposal.

TIME FRAMES

- **A contract will be awarded to the winning bid for the period beginning 12/1/06.**
- **The contract amount for subsequent years through 9/30/09 will be dependent on DHS availability of funds and service needs.**

REPORTS

The following reports will be required on a regular basis for DHS's objective of assessing the continuing need for this type of program.

- **The contractor will prepare a Pre-enrollment survey for the kinship families which assess the extent of need for these services.**
- **Monthly report to include:**
 1. **Number of Grandparents/kinship families enrolled in the program, a listing of names and source of the referral.**
 2. **Number of Grandparents/kinship families assisted in obtaining legal guardianship and a listing of names with the guardianship status (i.e. temporary or permanent guardianship, or pending.)**
 3. **Number of client outreach services which include transportation, contacts via in-home, telephone and office eventually leading to accessing community resources. Compiled log of names and services rendered.**
 4. **Number of participants in weekly sessions of Grandparent Support Groups.**
 5. **Number of Grandparents/kinship families participants in Family Life/Activities workshop sessions on various topics.**
 6. **Number of clients receiving respite care broken out by type: Grandparents/kinship families only, child(ren) only, or jointly.**

- 7. Number of consultations provided to DHS foster care staff regarding relative caregivers' issues.**
- **Final Report – At the end of each contract year (September 30), a final report shall be submitted based on the above statistical data to describe, summarize, compare actual against projected and to provide an outlook of services for the next contract year.**
 - **The contractor will conduct and submit a Post survey for the kinship families which assess satisfaction with the service.**

EVALUATION

This contract will be evaluated by DHS on the following criteria (Note: the following information will be determined from the reports above and required follow-up surveys to participants enrolled at any time by the contractor.)

- 1. Ninety (90)% of the children receiving KINSHIP SUPPORT SERVICES will not require any out-of-home placement during program participation.**
- 2. Ninety (90)% of the children completing KINSHIP SUPPORT SERVICES will not require an out-of-home placement within six months of case closure.**
- 3. Ninety (90)% of child caregiver(s) receiving family support services will exhibit improved family functioning by accessing resources on their own.**
- 4. Ninety (90)% of families receiving family support and KINSHIP SUPPORT SERVICES will be satisfied with services at case closure based on a Post survey prepared by the contractor.**

DESCRIPTION OF SERVICES FOR BID

Geographic Area

Wayne County

Client Eligibility Criteria

1. Kinship families identified will include any of the following from:
 - a) Community and self-referrals.
 - b) CPS intervention and child placed with appropriate relative.
 - c) Families with CPS contact within the last 18 months and are assessed as low-to-moderate risk.
 - d) Kinship families who are licensed foster parents.
 - e) Relative placements established through foster care intervention.

2. Determination of Eligibility

The Contractor shall determine eligibility for any services available through this Agreement.

Services to be Delivered

Service #1 of 4: KINSHIP CARE ASSESSMENT/SERVICE PLAN

1. Activities the Contractor shall perform:

The Contractor shall:

- a. Provide coordinators who possess a bachelor's (or higher) degree in social work, counseling, or a related field.
- b. Accept telephone referrals from DHS, community agencies and families caring for their relatives. Telephone referrals will be followed up with written Kinship Referral Form. The Kinship Referral Reporting Form shall be developed jointly by the contractor and DHS.

- c. Provide an initial in-home intake interview within five (5) working days of each referral.
 - Complete a initial written assessment within ten (10) working days for the purpose of gathering information on type of services needed for the child and/or the family
 - Inform kinship or Grandparents/kinship families about the program and its benefits such as assistance with, but not limited to, neglect and abuse issues, guardianship , adoption, financial assistance programs, parenting, child support, web-based information available for kinship families, and other social and legal services.
 - Inform kinship or Grandparents/kinship families of support group sessions, and invite them to attend a support group.
 - Offer additional outreach services including additional telephone contacts and up to two (2) additional in-person contacts for kinship or Grandparents/kinship families who may need to build trust before accepting services.
- d. Ensure that the short-term focus of the service plan is on problem solving that addresses the immediate needs of the kinship or Grandparents/kinship families and/or child(ren).
- e. Ensure that the long-term focus of the service plan is on self-sufficiency, improved life skills, development of improved relationships within the family unit, empowerment, and building links to other family and community resources.
- f. Develop a written Kinship or grandparent Outreach Service Plan (OSP) for each relative caregiver eligible for the provision of services including, but not limited to:
 - 1. Identification of the kinship or grandparent and child(ren) and/or a relative's minor child(ren).
 - 2. Identification of problems and needs, such as relative caregiver's or family needs for respite care, legal assistance, or emergency needs services.
 - 3. Identification of services to be utilized for the purpose of resolving identified problems and needs.

4. Establish outcome goals, objectives and time lines for the completion of activities and/or services to resolve identified problems and service needs.
 5. Update and maintain a specialized resource directory that identifies agencies/organizations that provide services including but not limited to child day care, respite and recreational resources, medical and mental health services, financial assistance, legal assistance, education and guardianship.
- g. Ensure that the service plan is presented to, reviewed by, and signed by both the individual kinship or grandparent and the coordinator in order to document and specify the types of services and/or activities to be provided in order to attain outcome goals and objectives.
 - h. Maintain a copy of each individual Outreach Service Plan. A copy of each plan shall be submitted to the referring agency within 30 calendar days from the assessment date.
 - i. Follow-up with kinship or Grandparents/kinship families on a monthly basis to provide updated information on the availability of workshops, support groups, seminars, etc and to ensure participation in these services.
 - j. Provide outreach services to the kinship caregivers/Grandparents/kinship families to include but not limited to;

In-home assessments for service planning with kinship caregivers to include; the need for counseling services, peer support groups, financial assistance, legal advocacy, health intervention, and emergency needs.

Provide advocacy services by accompanying kinship caregivers/Grandparents/kinship families in attendance at court hearings, school conferences and meetings with attorneys
 - k. Make available to kinship caregivers/Grandparents/kinship families information on child day care, respite and recreational resources, medical and mental health services, financial assistance, legal assistance, education, etc. The necessary forms for **temporary or permanent** guardianship must be made available by the contractor. Provide assistance in filling out these forms.

- I. Initiate referral to community support groups to provide support in specific areas such as substance abuse, parenting skills, stress management, and coping skills.
- m. Assist in supporting continued economic self-sufficiency of kinship caregivers/Grandparents/kinship families in meeting financial expenses resulting from the responsibility of kinship care.
 - 1. Document and support unmet needs or barriers to services as part of the comprehensive Outreach Service Plan (OSP) for kinship or grandparent. The purchase of goods or services must address the identified risks and must have some relationship to attaining the goals established in the OSP.
 - 2. Coordinate with other organizations within the community in assisting with direct services to clients including but not limited to: food, clothing, financial, medical, legal services and dental care.

Before approving specific assistance funds for unmet need, instruct kinship caregivers or Grandparents/kinship families to apply to DHS for eligibility determination for any resources available before accessing specific assistance funds for unmet needs.

Must receive and maintain in customer file copy of DHS written award letter approving or denying requested goods or services.

- 3. Provide specific assistance to families, after all resources have been exhausted and barriers to services addressed;

A maximum amount of \$500.00 per family can be expended during the contract period.

Specific assistance may include, but not be limited to food, clothing, bedding, legal fees (guardianship fees, probate court processing fees, etc), school supplies, and transportation costs (bus tokens, taxi fare, etc.).

All expenditures must be verified by a bill or receipt, signed by the program coordinator.

Certain uses of specific assistance funds may be prohibited based on laws governing the expenditure of

federal or state funds, or may be unwise in certain situations. Questions concerning use of Specific Assistance Funds should be directed to the Wayne DHS Strong Families/Safe Child(ren) – Suite 5-600, Cadillac Place – Detroit, MI 48202; 313-456-1101.

- n. Document and maintain records of services provided that include each kinship or grandparent's individual service plan, documentation of unmet needs, documentation of barriers to services, documentation of outreach services provided, and documentation of specific assistance provided.
- o. Coordinate and monitor the implementation of the Outreach Service Plan serving no less than thirty (30) families per year per coordinator.

2. Time Frame

Families shall be served up to six (6) months based on an individual Outreach Service Plan. Contractor staff in consultation with referring agency staff may request extension up to 30 days on a case-by-case basis. Services shall not exceed a total of seven (7) months.

3. Volume of Service

Clients - The estimated number of eligible clients to be served during the period of this Agreement shall be: 160 families

4. Unit Definition(s): One unit equals one family served for up to six (6) months including assessment, service plan, follow-up, and outreach services.

5. Units:

The estimated number of units to be provided by the Contractor during the period shall be 160.

Service #2 of 4: WORKSHOP – DEVELOPMENT AND FACILITATION

1. Activities the Contractor shall perform:

The Contractor shall:

- a. Design and provide a minimum of **12** workshops which include 5 (five) 1 to 1 ½ hour sessions with a minimum of 10 attendees per session. Workshop will provide kinship or grandparent care education to

provide opportunities for learning through written materials and discussions.

- b. Provide workshops on several topics to include, but not limited to:
 - The importance of permanency and stability of child(ren)'s living arrangements or situation.
 - Steps to preserving for child(ren) a continuity of family relationships and connections.
 - Health care prevention, child health & development and Family dynamics.
 - How to's of addressing legal issues as a kinship or grandparent caregiver.
 - Substance abuse prevention education
 - Securing community resources to meet the educational and social needs of child(ren).
 - Parenting child(ren) through grief and losses, poor self-esteem, behavioral and emotional problems.
 - Parenting skills training to address issues of abandonment, anger and sadness expressed by child(ren) in relatives, Grandparents/kinship families, or kinship placements.
 - How to identify and locate youth focused community services.
 - The impact of technology on today's youth.
 - Importance of relationships among teens.
 - Communication skill development: communicating with youth.
 - Child Safety needs.
 - Other identified issues.
- c. Provide workshops at locations accessible to clients. Contractor is responsible for providing or arranging for clean, adequate meeting rooms. Workshops will be held during day or evening hours or at

agreed upon hours established in a brochure of scheduled workshops.

- d. Workshops must have a minimum of ten (10) attendees. Reschedule any workshops if number of participants is less than ten (10).
- e. Provide on-site childcare for child(ren) ages birth to 6 for workshop participants during sessions. Day care costs cannot exceed the 10/1/05 DHS approved rates (\$1.60 per hour in the Kinship caregiver home, \$2.50 per hour in another setting with Kinship caregiver approval.)
- f. Document and maintain records of each workshop including; date of workshop, begin and ending times, names and addresses of attendees, topics covered, and daycare information.

2. Time Frame

Workshops shall be provided during the term of this Agreement.

3. Volume of Service

Clients - The estimated minimum number of eligible clients to be served during the period of this Agreement shall be: 600 (60 sessions x 10 clients.)

4. Unit Definition(s): One unit equals one workshop session that is at least 1 to 1 ½ hours long with a minimum of 10 attendees.

5. Units:

The estimated number of units to be provided by the Contractor during the period shall be 60.

Service #3 of 4: KINSHIP OR GRANDPARENT SUPPORT GROUPS

1. Activities the Contractor shall perform:

The Contractor shall:

- a. Provide support group recruitment activities through the development of a brochure to be distributed to human service agencies and schools.

- b. Establish and conduct ongoing support groups that will meet once a month. Each support group shall have a minimum of 7 and a maximum of 15 participants. Each meeting will last a minimum of one (1) hour.
- c. Ensure that an employee of the agency with a minimum of a bachelor's degree in social work, counseling or related field facilitates each support group meeting.
- d. Promote attendance at support group meetings by;
 - Providing information on means for on-site daycare during the meeting period.
 - Providing transportation to and from the support group meetings, as needed (i.e. bus tickets, agency transport, etc.)
 - Plan and conduct at least two (2) inter-generational events to allow kinship caregivers or Grandparents/kinship families and their child(ren) the opportunity to interact with persons who have similar life experiences.
 - Provide refreshments , entertainment , and recreation activities in the form of games, music, dancing, and other group activities at these events.
- e. Maintain a log of participants in each support group meeting. Provide a copy of each log to DHS contract management with monthly Statement of Expenditures (DHS-3469).

2. Time Frame

The duration and length of time spent in each support group shall be based on the curriculum designed by the contractor but shall not extend beyond the term of this Agreement.

3. Volume of Service

Clients - The estimated number of eligible clients to be served during the period of this Agreement shall be: 970 kinship caregivers or Grandparents/kinship families.

- 4. Unit Definition(s): One unit equals one Kinship or grandparent support group that is at least one (1) hour long, and attended by a minimum of seven (7) attendees and a maximum of 15.

5. Units:

The estimated number of units to be provided by the Contractor during the period shall be 88.

Service #4 of 4: RESPITE CARE

1. Activities the Contractor shall perform:

The Contractor shall:

- a. Recruit respite care providers from community agencies unless the provider is a relative of the kinship caregiver and the relative is identified by the kinship caregiver as the preferred provider of respite care.
 - 1) Reimburse respite care expenses to the provider, after the service has been provided, at rates not to exceed DHS approved day care rates of (a) \$/1.60 per hour in the caregiver home; (b) \$2.50 per hour in other caregiver approved settings. (Current rates: 10/05/05.)
 - 2) Approval to expend funds for respite care shall be based on a two-step approval process – the case manager and the supervisor's signature shall be required to authorize payment
 - 3) Respite care services shall be provided in the home of the kinship caregiver, functioning as the primary caregivers for grandchildren or a relative's minor child(ren), or at an alternate location and /or activity approved by the kinship caregiver.
- b. The Contractor, in consultation with the family, must determine the appropriate type of respite based on the reported needs of the family. The respite care to kinship families for the children are offered through community facilities that offer a balance of experiences and activities that focus on the physical, recreational, intellectual, social, creative and cultural development as follows:
 - 1) A minimum of 3 hours of after-school respite care per family 4 times per month.

OR

- 2) A minimum of 3 hours of daytime respite care per family during school or day care hours 4 times per month.

OR

- 3) A maximum of 60 hours of evening respite care per family per month.

OR

- 4) A full day of respite care from 7 a.m. to 6 p.m. daily up to a maximum of 7 days per family per month.

OR

- 5) A camper-ship (available during the year), any extended stay, or weekend respite for children and/or kinship caregivers for a minimum of three (3) days per family per quarter.

- c. Provide respite care for kinship caregivers/grandparents and children through monthly social, cultural, and recreational activities. The activities will include the following categories;

- 1) Children only day-activities/events.
- 2) Kinship caregivers and children activities.
- 3) Kinship caregiver only sponsored activities.

Respite total hours for the categories above must not exceed 60 hours per year per family.

- d. Arrange for the provision of respite care due to Kinship caregivers/grandparents' need due to illness, stress, or other relevant causal factors. Health issues reported must be assessed, documented and verified in order to determine the needed duration of and the appropriate type of the respite.

Respite total hours for the categories above must not exceed 60 hours per year per family.

- e. Document and maintain records including but not limited to:
 - 1) Names and addresses of kinship/grandparent caregivers and types of respite received.

- 2) Names and addresses of children in receiving respite and type of respite received.
- 3) Monthly compiled dates and number of hours that children and or kinship caregivers are in respite care.
- 4) Log of total (cumulative) hours of respite care used per family recorded quarterly.

2. Time Frame

Respite care, as outlined, shall be made available during the term of this Agreement.

3. Volume of Service

Clients - The estimated number of eligible clients to be served during the period of this Agreement shall be: 90.

4. Unit Definition(s): One unit equals three hour of respite care per child, or per kinship caregiver or family.

5. Units:

The estimated number of units to be provided by the Contractor during the period shall be 16,200.

Evaluation Reporting Requirements

The Contractor shall submit to the DHS for evaluation purposes all of the monthly reports identified below:

- **Monthly report to include:**

1. **Number of Grandparents/kinship families enrolled in the program, a listing of names and source of the referral.**
2. **Number of Grandparents/kinship families assisted in obtaining legal guardianship and a listing of names with the guardianship status (i.e. temporary or permanent guardianship, or pending.)**
3. **Number of client outreach services which include transportation, contacts via in-home, telephone and office eventually leading to accessing community resources. Compiled log of names and services rendered.**

- 4. Number of participants in weekly sessions of Grandparent Support Groups.**
 - 5. Number of Grandparents/kinship families participants in Family Life/Activities workshop sessions on various topics.**
 - 6. Number of clients receiving respite care broken out by type: Grandparents/kinship families only, child(ren) only, or jointly.**
 - 7. Number of consultations provided to DHS foster care staff regarding relative caregivers' issues.**
- Final Report – At the end of each contract year (September 30), a final report shall be submitted based on the above statistical data to describe, summarize, compare actual against projected and to provide an outlook of services for the next contract year.**
 - The contractor will conduct and submit a Post survey for the kinship families which assess satisfaction with the service.**

REQUEST FOR QUOTE - RATING CRITERIA

A Rating Committee will rate the request for Quote (RFQ) proposals according to the following criteria:

I. Bidder's Experience/Qualifications

(25 Points)

A. Agency

1. Has bidder ever performed similar services for DHS or another purchaser? How recently were services provided (begin and end dates)? If monitoring reports are available, please attach.
2. Why did the services come to an end? Did the bidder indicate the number of families, number of child(ren) and outcome of the program?
3. Explain how your past experience is similar to Kinship Services that DHS is seeking to provide.

B. Staff

1. Do the position descriptions for direct services staff persons require experience in this or related services?

Considerations:

- Length of experience (curriculum vitae or resume for each)
- Similarity of experience to services to this RFQ.

2. Does the supervisory staff, who will provide supervision and oversight of direct-care staff, have previous work experience in this or related services?

Considerations:

- Length of experience (curriculum vitae or resume for each)
- Similarity of experience to services to be required.
- Is supervisory staff required to have an appropriate level of direct care experience?

3. Does the administrative staff who will provide administrative oversight have experience in this or a related service?

Considerations:

- Length of experience (curriculum vitae or resume for each)
- Similarity of experience to services to be required

- Does the bidder have management and administrative support personnel adequate to produce a satisfactory level of performance?
- Will the service provided correspond to DHS needs?
- Does current administrative staff have previous work experience in directly providing these similar services?
- Does current administrative staff have appropriate previous work experience in human service administration?

C. Education

1. Are educational requirements appropriate for each of the following types of staff?
 - a. Direct Service
 - b. Supervisory
 - c. Administrative
2. Does the bidder provide an acceptable level of training for new staff?
3. Does the bidder have an acceptable level of on-going training to staff?

D. Staff Screening

Is the bidder's procedure for screening staff for prior criminal activity acceptable?

II. Program Implementation (Work Plan) (35 Points)

A. Service Delivery

1. Are step-by-step procedures described in detail? Do they demonstrate ability to fully implement the program?
2. Does the bidder demonstrate ability to provide services to a diverse client population?
3. Is the bidder's plan for accommodating client barriers to accessing services adequate?
4. Does the proposal adequately describe how the bidder will engage eligible clients and encourage a high level of participation?
5. Are the bidder's assessment process and on-going services relevant for client need, program eligibility, and intent?

6. Does the bidder have an acceptable plan in place to assure that service will begin on the identified date?
7. Does the bidder demonstrate the ability to coordinate services with other agencies for clients served by multiple systems?
8. Is the bidder's proposed curriculum adequately and appropriately addressing client needs?

B. Staffing

1. Does the proposed organizational chart describe appropriate lines of supervision and authority to assure efficient delivery of service and contract compliance?
2. Does proposal include adequate descriptions of roles for executive/administrative staff, management/supervisory staff, direct-care-staff, and other supportive personnel?
3. Does the bidder have an acceptable turnover rate for direct care staff?
4. Does the bidder have acceptable plan in place to address continuation of service when staff turnover occurs?

III. Fiscal Resource Allocation

(25 Points)

1. Are the resources (budgeted details such as salaries, occupancy, communication, supplies & equipment, transportation, contracted services, and miscellaneous) reasonable to accomplish the bidder's work plan, and reasonably adequate to provide a consistent level of service throughout the life of the agreement?
2. Are the resources identified in the narrative portion of the proposal consistent with those in the budget?
3. Does proposal specifically identify what resources bidder has available and how it will utilize those resources to facilitate accessibility (i.e., staffing allocation; communication; transportation, community contacts, etc.)?
4. Is the quantity of resources appropriate, necessary, and reasonable for the level of proposed services? Do they match?
5. Has the bidder identified other funding and/or donated or non-cash resources to support services and use the funding efficiently?

6. Has the bidder documented sufficient match to meet state and federal requirements?
7. Does the proposal include unallowable costs that will impact the ability of the bidder to implement the work plan?
8. If the bidder provides in-kind, do they demonstrate a dependable, consistent source of in-kind funding?
9. Does proposal demonstrate that the bidder's resources can sustain an adequate level of service throughout the life of the agreement (including staffing, communication resources, and the described facility [both location and size])?
10. Are the number of direct-care staffing hours adequate to deliver the level of needed service, as identified in both the fiscal and Narrative portions of the proposal?

IV. Availability/Accessibility

(15 Points)

1. Does the proposal adequately describe how bidder will provide outreach services?
2. Is the bidder able to provide services at times when most clients can access them? Is the bidder reasonably accessible to the client population during non-traditional service hours?
3. Transportation
 - a. Is the bidder located close to public transportation?
 - b. Is the bidder's plan for arranging/providing client transportation feasible and appropriate?
4. Is the use of specific assistance funds reasonable and appropriate to achieve program goals?

V. Price

Competitiveness in pricing will be determined using a formula that will divide the lowest bid price (from that region) by the bidder's price, and then multiply that by the bidder's initial score, determined through the above rating criteria.

REQUEST FOR QUOTE POLICY

General Information

This Request for Quote (RFQ) provides interested bidders with sufficient information to prepare and submit proposals for consideration by the Department of Human Services.

1. Contract Award

Contract award negotiations will be undertaken with those Contractors whose bid responses, as to price and other factors, show them to be qualified, responsible, and capable of performing the work.

The contract entered into will be that contract most advantageous to DHS, price and other factors considered. DHS reserves the right to consider bid responses or modifications thereof received at any time before award is made, if such action is in the best interest of DHS.

If a contract is awarded, the selected bidder will be required to comply with standard, non-negotiable General Provisions, which will be a part of the contract.

2. Rejection of Bid Responses

DHS reserves the right to reject any and all proposals received as a result of this RFQ, or to negotiate separately with any source whatsoever in any manner necessary to serve the best interest of DHS. This RFQ is made for information or planning purposes only. DHS does not intend to award a contract solely on the basis of any response made to this request or otherwise pay for the information solicited or obtained.

3. Incurring Costs

The State of Michigan is not liable for any cost incurred by the Contractors prior to issuance of a contract.

4. Inquiries

Questions regarding content of this RFQ must be submitted in writing to the Issuing Office. All questions must be submitted on or before the date specified on the cover sheet.

5. Amendment to the RFQ

In the event it becomes necessary to revise any part of this RFQ, addenda will be posted to this website.

6. Response Date

To be considered, bid response must arrive at the Issuing Office on or before the date and time specified in the cover sheet. Bidders mailing responses should allow normal delivery time to ensure timely receipt of their bid responses.

7. Bid Response

To be considered, bidders must submit a complete response to this RFQ, using the exclusively the format provided in the "Bidder Response to DHS". Bid Responses must be signed by an official authorized to bind the bidder to its provisions. The bid response must remain valid for at least 90 days.

8. Acceptance of Bid Response Content

The contents of the bid response of the successful bidder may become contractual obligations if a contract ensues. Failure of the successful bidder to accept these obligations may result in cancellation of the award.

9. Economy of Preparation

Bid Responses should be prepared simply and economically, providing a straightforward, concise description of the bidder's ability to meet the requirements of the RFQ.

10. Prime Contractor Responsibilities

The selected Contractor will be held accountable for all services offered in the bid response. Further, the State will consider the selected Contractor to be the sole point of contact with regard to contractual matters, including payment of any and all charges resulting from the contract.

11. News Releases

News releases pertaining to this RFQ on the service, study, or project to which it relates will not be made without prior State approval, and then only in coordination with the Issuing Office.

12. Disclosure of Proposal Contents

Bid Responses are subject to disclosure under the Michigan Freedom of Information Act (P.A. 1976, No. 442).

13. Independent Price Determination

- a. By submission of a bid response, the bidder certifies:
 - 1) The prices of the bid response have been arrived at independently without consultation, communication, or agreement, for the purpose of restricting competition, as to any matter relating to such prices with any other bidder or with any competitor;
 - 2) Unless otherwise required by law, the price quotation in the bid response has not and will not be knowingly disclosed by the bidder to any potential bidder;
 - 3) No attempt has been made or will be made by the bidder to induce any other person or agency to submit or not to submit a bid response for the purpose of restricting competition;
 - 4) The price quoted is not higher than that given to the general public for the same service.
- b. Each person signing the bid response certifies that:
 - 1) She/he is the person in the bidder's organization responsible within that organization for the decision as to prices being offered in the bid response, and that she/he has not participated, and will not participate in any action contrary to a. 1 through 4 above; or
 - 2) She/he is not the person in the bidder's organization responsible within that organization for the decision as to the prices being offered in the bid response, but that she/he has been authorized in writing to act as agent for the persons responsible for such decision in certifying that such persons have not participated, and will not participate, in any action contrary to a. 1, through 4 above, and as their agent does hereby so certify; and that she/he has not participated, and will not participate in any action contrary to a. 1 through 4 above.
- c. A bid response will not be considered for award if the bidder is found to be noncompliant with any part of section 13 unless the bidder furnishes with the bid response a signed statement which sets forth in detail the circumstance of the disclosure and the Issuing Office determines that such disclosure was not made for the purpose of restricting competition.

BIDDER INFORMATION

1. To receive reimbursement from the State of Michigan, a Contractor must be registered as a vendor on the Michigan Accounting and Information Network (MAIN)

To register on MAIN:

- Click on <http://www.cpexpress.state.mi.us/>
 - Follow directions.
2. **Proof of public liability insurance** must be provided to DHS prior to the time the contract is executed (issued).
 3. If portions of the services are being subcontracted, the bidder must identify the services the subcontractor will perform and provide all information requested, (including a budget) as it applies to both the bidder and the subcontractor(s).

A contractor is responsible for the performance of any subcontractors who are held to the same standard of quality and performance as the contractor. Raters of bid responses will consider the qualifications of both the contractor and subcontractor when making contract award recommendations.

4. In completing the bidder response, please note the following:
 - The bid response should be paginated, except for attachments
 - Font size should be 12 or larger
 - Observe restrictions on number of pages. Restrictions do not include resumes, position descriptions, organizational charts or other attachments.

BIDDER RESPONSE SECTION

1. Bidder Name: _____

2. Bidder Mailing Address: _____

Bidder E-mail Address: _____

Bidder Fax Number: _____

3. Bidder Mail Code: _____ (Identified when registering on **MAIN**. See previous page)

4. Type of Organization: (Check one). Individuals are private proprietary.

_____ private, non-profit _____ private, proprietary _____ public _____ university

5. Bidder's fiscal year begin date: _____ (day and month)

6. Bidder's representative who is the authorized negotiator for the bidder.

(Name)

(Telephone Number)

7. Statement of Intent

The bidder hereby assures that the Request for Quote has been reviewed by the organization's governing body and that body has authorized submission of a bid response; that the person identified above as "bidder's representative who is the authorized negotiator" has been authorized by the governing body to represent the organization for the purposes of the submission of a bid response and contract negotiation; and that the organization intends to provide services according to the information contained in this Request for Quote, if selected and funded to do so.

Signature of Organization
President or Director

(Date)

Typed Name of Organization
President or Director

(Date)

BIDDER RESPONSE TO BE SUBMITTED

General Information

- a. Primary purpose/function of the bidder's organization.
- b. List all locations that will be involved in providing service.
- c. List all contracts with DHS in the past 5 years. Please identify by contract number.

I. Bidder Experience/Qualifications

Provide the following information:

A. Agency

1. For each agency, prepare a narrative description of prior experience, providing the following information:
 - a. Brief description of service provided;
 - b. Purchaser of service;
 - c. Description of client population;
 - d. Dates of service provision;
 - e. Describe the degree of similarity between related services the bidder has provided and the services being bid;
 - f. Name and telephone number of a contact person for each individual or agency for whom service was provided.
2. Please describe your agency's collaborative relationship with relevant community systems. Include the following information:

Name of agencies, dates of collaboration, client population. Describe the collaborative relationship and outcomes.

B. Staff

Using Staffing Allocation and Qualifications, CM-011, (attachment A) provide the requested information for each service for which a bid response is submitted. Provide position descriptions for all positions included in the price quotation. Identify the positions current staff will fill if the contract is awarded to the bidder.

1. Identify specific experience current direct service staff have as it pertains to the services to be provided (possession of applicable licenses, completion

of applicable training or workshops, etc.) and minimum experience requirement for each position.

2. Identify specific experience current supervisory staff have as it pertains to the services to be provided (possession of applicable licenses, completion of applicable training or workshops, etc.) and minimum supervisory and direct care experience requirement for each position.
3. Identify specific experience current administrative staff have as it pertains to the services to be provided (possession of applicable licenses, completion of applicable training or workshops, etc.) and minimum experience requirement for each position.
4. Include resumes for all current Direct Care and Supervisory staff who will provide services.
5. Attach a salary schedule for each staff employee who will provide services as identified above. Include all automatic and/or merit pay increases individuals will be eligible to receive during the term of the contract.
6. For each position, list the number of hours and the number of weeks to be committed to the services being bid.
7. Describe your current rate of turnover, (overall and direct service) including expectations for current staff continuance, planned staff reductions or growth, and comment regarding anticipated future turnover. Describe mechanisms in place to encourage staff retention.
8. Provide an organization chart that shows the structure that will be used to provide services if the contract is awarded. This should show who in your organization will be responsible for reporting to the DHS' Contract Administrator (CA). Please make sure position titles on the organizational chart match title designations referenced elsewhere in the bid response.

C. Education

1. Identify minimum education requirements for direct service, supervisory, and administrative staff.
2. Identify and describe minimum requirements for initial staff training.
3. Identify and describe current requirements and/or plans for on-going staff training.

D. Staff Screening

Identify the procedures used to screen staff for prior criminal activity.

E. Performance

1. Include copies of monitoring evaluation reports from DHS for which services relevant to this RFQ have been provided. If findings are identified on a monitoring report include the corrective action plan (not letters of reference).
2. Include copies of monitoring evaluation reports from any agencies for which services relevant to this RFQ have been provided. If findings are identified on a monitoring report include the corrective action plan (not letters of reference).

B. Work Plan (Program Implementation)

In narrative form, please describe how the bidder would implement the program described by DHS. Include the following information and identify each section by number and heading indicated below.

1. Prepare a description of the way in which service would be provided to a client.
 - a. List each step, process, or activity a typical client would encounter in successfully completing the service (similar to a program flow chart).
 - b. Describe the client assessment process with regard to program eligibility and intent. Identify steps and time frames.
 - c. For each position, list the number of hours and the number of weeks to be committed to the services being bid and the anticipated duration of service required to complete the service: hours per day, days per week, and total hours/week.
2. Describe the needs and strengths of the client population.
 - a. How will delivery of service address those issues?
 - b. How will the service plan address client barriers?
 - c. How do facilities/services encourage participation by clients with special needs?

3. For each process or activity, indicate how completing that process or activity would engage and assist the client in accomplishing goals.
4. Once the contract is awarded, indicate how long it will be before you or your agency will be able to provide service (be specific, i.e., 30 days, 45 days, etc.) Confirm ability to provide service on the identified date.
5. Describe your plan to coordinate services with other community agencies involved in the client's plan of treatment. Identify the agencies, services, level of coordination and client involvement, and history with the agencies.
6. Provide a copy of the curriculum that will be used. If not applicable to your service, enter N/A.

If the curriculum is specified in the RFQ and must be followed as outlined, indicate "Will follow required curriculum." Identify all audio-visual and/or training aids that will be used.

Curriculum - For teaching and/or training (workshop) services, provide a copy of the curriculum that will be used.

C. Achievement of Outcomes

1. Specify the number of clients expected to achieve the desired outcomes.
2. Identify anticipated outcomes for the services to be provided.
3. What percentage of outcomes will be achieved for clients served?

D. Fiscal Resource Allocation/Budget Narrative

Use the attached Resource Grid (CM-0043), (attachment B) to provide a narrative description of all resources the bidder requires to meet the requirements of the contract. Please be as brief as possible, while including all pertinent information.

1. Itemize (without indicating actual dollar amounts) the types of employees benefits offered, the square footage of each facility, supplies, travel mileage and other resources included in your budget. Be as specific as possible and quantify all resources whenever possible.
2. If resources will be provided through another source, identify the source and type of funds to be used. All match and in-kind funding should be identified and explained.

This information will be used to determine whether or not the resources included in the price quotation are adequate to provide the services DHS wishes to purchase as stated in the RFQ. The budget narrative will be compared to the

price and budget documentation for each bid response submitted by an individual specifically assigned to conduct a fiscal review.

NOTE: Do not include figures that would indicate the dollar amount of bid or cost in this section. Dollar amounts should be stated in the sealed price/budget portion of your response.

E. Availability/Access

A Outreach

Indicate ability to provide outreach services in clients' homes or mutually agreed-upon locations if this is requested in the service description. Ability to respond to crisis situations.

Specify normal hours of business and indicate ability and willingness to provide additional hours at other times or days if necessary.

B. Transportation

1. Describe access to public transportation.
2. Indicate ability to arrange transportation for clients to receive services, such as convenience to public transportation, bidder-owned vehicles, etc.

C. Specific Assistance

1. How available
2. How used and when

E. Budget Completion

Complete the following Price Quotation sheet and a Budget Statement (CM-468) and Budget Detail Sheets (CM-468A) (http://www.michigan.gov/documents/CM-468ex_15681_7.xlt) in accordance with instructions. The bidder should complete the Budget forms only for the first 12 months if the bid response is for a multi-year period.

The bidder should submit price quotation and budget in an envelope separate from the rest of the bid response.

- If the initial period of the contract is for less than 12 months, a prorated contract amount will be calculated accordingly.
- The price established and approved by DHS will be in effect for the entire period of the contract and cannot be changed during that time.

F. Budget Narrative

Use the attached Resource Grid (CM-0043), (attachment B) to provide a narrative description of all resources the bidder requires to meet the requirements of the contract. Please be as brief as possible, while including all pertinent information.

1. Itemize (without indicating actual dollar amounts) the types of employees benefits offered, the square footage of each facility, supplies, travel mileage and other resources included in your budget. Be as specific as possible and quantify all resources whenever possible.
2. If resources will be provided through another source, identify the source and type of funds to be used. All match and in-kind funding should be identified and explained.

This information will be used to determine whether or not the resources included in the price quotation are adequate to provide the services DHS wishes to purchase as stated in the RFQ. The budget narrative will be compared to the price and budget documentation for each bid response submitted by an individual specifically assigned to conduct a fiscal review.

NOTE: Do not include figures that would indicate the dollar amount of bid response or unit cost in this section. Dollar amounts should be stated in the sealed price/budget portion of your response.

BIDDER NAME:

PRICE QUOTATION

Use this form to state the price offered to DHS for the service to be provided. The price quoted is to be per unit of service as defined in the service description in the RFQ and extrapolated from the budget information provided. Please identify the service being bid, using the title as shown in the RFQ.

Service #1: KINSHIP CARE ASSESSMENT/SERVICE PLAN

Unit Definition: One unit equals one family served for up to six (6) months including assessment, service plan, follow-up, and outreach services.

a. Price per unit of service: \$ _____/unit

Service #2: WORKSHOP – DEVELOPMENT AND FACILITATION

Unit Definition: One unit equals one workshop session that is at least 1 to 1 ½ hours long with a minimum of 10 attendees.

a. Price per unit of service: \$ _____/unit

Service #3: KINSHIP OR GRANDPARENT SUPPORT GROUPS

Unit Definition: One unit equals one Kinship or grandparent support group that is at least one (1) hour long, and attended by a minimum of seven (7) attendees and a maximum of 15.

a. Price per unit of service: \$ _____/unit

Service #4: RESPITE CARE

Unit Definition: One unit equals three hour of respite care per child, or per kinship caregiver or family.

a. Price per unit of service: \$ _____/unit

Bidder: Submit this form in a separate envelope with the budget.

BIDDER RESPONSE: STAFFING ALLOCATION AND QUALIFICATIONS

Michigan Department of Human Services

Bidder Name					
*					
County			Type of Service		
CATEGORY	POSITIONS	RATE/ HOUR	HOURS/ WEEK	# OF WEEKS	QUALIFICATIONS
**MANAGERIAL/ SUPERVISORY					
DIRECT SERVICE					
SUPPORT STAFF					

* Please provide information on staffing only for services to be provided for the request for quote/contract.

**Managerial/supervisory refers to administrative positions. If a position is both administrative and direct service, prorate the position into the correct categories.

Department of Human Services (DHS) will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, height, weight, marital status, political beliefs or disability. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you are invited to make your needs known to a DHS office in your area.

RESOURCE GRID

MICHIGAN DEPARTMENT OF HUMAN SERVICES

* Do not include dollar amounts.

** List any match resources your agency will be providing and the fund source of that match.

Resource	Description
Employee Fringe Benefits (FTEs by position)	
Occupancy (square feet and number of Facilities)	
Communications (fax, telephone, number of lines and phones)	
Supplies (general, program, duplicating)	
Equipment	
Local Transportation (number of miles for client transportation)	
Contractual Services	
Specific Assistance to Individuals	
Miscellaneous	

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